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Case Study

Golden Triangle Family Practice

May 2010

Background:

Golden Triangle is a three (3) provider family practice located in Bridge City, Texas. This practice has been in business since 1993. Golden Triangle serves the family practice needs of its community, serving patients from age 3 and for the rest of their life. The mix of patients by payer is:

- 20% Medicare

- 33% Blue Cross Blue Shield

- 18% Self Pay

- 29% Other insurance

Reasons for implementing Electronic Health Records (EHR):

Golden Triangle cited the following reasons for implementing an Electronic Health Records system:

1) Protection of medical records. As a result of Hurricane Ike, Golden Triangle had over 1,800 medical records materially impacted. This caused an enormous disruption to the practice and their patients. As their Practice Manager, Debbie Khan, notes "while the likelihood of another hurricane anytime soon may be remote, we don't want a broken water pipe or some other unforeseen problem to damage our medical records."

2) Become more efficient. While averaging 35 patients per provider per day (105 daily average) prior to implementation, Golden Triangle believed that through effective implementation of a sound EHR system they could, in the words of Khan, "work smarter, not harder."

3) Code correctly (and get paid for) the services being provided, making sure to capture any missing charges.

4) Effectively interface with their existing Practice Management/Billing system. Golden Triangle was satisfied with their existing practice management/billing system and did not want the added trauma of changing practice management/billing in addition to implementing an EHR.

Selection Criteria:

According to Debbie Khan, Golden Triangle's Practice Manager, the primary selection criteria for their new electronic health record system matched their goals and these were:

- Security of the system and the stored data. "We didn't want to replace our paper records with an electronic system also susceptible to natural or other disasters," stated Khan. "We wanted an EHR vendor that would take care of back-ups, redundancy, and otherwise protect our system and our data."

- Ease of Use. "We were already a very busy practice," stated Khan. "We needed an EHR that would allow us to maintain our current patient volume and ideally see the same number or more patients with fewer resources."

- Coding Support. "We knew we were seeing patients at levels higher than we were coding, but we weren't documenting everything we were doing," according to Khan. "We needed an EHR that would enable us to document the care we were giving and allow us to educate our providers on correctly documenting that care". During these tough economic times, it is imperative that we document correctly, code to the correct level, provide proof that the level selected meets the coding guidelines, and obtain maximum reimbursement for services rendered.

- Ability to effectively interface with their existing practice management/billing system for a reasonable cost.

The Selection Process:

Ms. Khan was given the task of coordinating the selection process for an EHR that met the above criteria, would permit significant growth, and provide the necessary foundation for accurate coding. "I was fortunate that my providers were helpful and reasonable during the selection process and we were able to determine the necessary criteria the EHR must have to meet our needs," stated Ms. Khan. "After researching several vendors I selected six (6) to review. The demos were very helpful in eliminating the vendors that could not deliver the results we required. Even though I was not limited financially by the selection, I felt the pressure of obtaining the best possible EHR that would give us the best return for our dollar. I required it to be user friendly, accommodating to changes in the medical practice, work well with my current billing system, and be easy to audit. By far, Sevocity® exceeded my expectations."

Implementation Process:

As a result of their selection process, Golden Triangle selected Sevocity. Sevocity's Implementation Coordinator then worked with Khan and Golden Triangle's providers and staff to create an Implementation Plan tailored to the practice.

Golden Triangle selected the "big bang" implementation process – rather than implement gradually, the practice made the decision to implement all providers and all functionality for all patients on the designated Go Live Date. According to Khan, "While Sevocity offered the option of a gradual implementation; we felt that we would regain productivity fastest by implementing Sevocity 100% immediately."

Golden Triangle selected August 14, 2009 for their Go Live Date – the date they would begin seeing all patients using Sevocity.

Prior to Go Live, many steps were taken to prepare. Following is a synopsis of each of the major implementation process steps:

- Current hardware was evaluated to determine if any needed to be replaced or modified, including the selection of new computers (Toshiba Tablets) for the clinical staff to use with Sevocity.

- Every aspect of daily workflow was reviewed including: business use of paper, forms, scheduling, and patient flow. Every document and form was sent to Sevocity.

- A plan was developed for use of the EHR in the Saturday clinic.

- Developed a contingency plan in the event of prolonged Internet downtime (Sevocity easily accommodates brief disruptions). In this event, the practice decided to enter the visit on paper and key the visit later rather than scan the paper document. Kahn notes that "since implementation, the occasions that the Internet has been out have been so little that we do not feel this has been a problem."

- Scheduled one full day of training for all employees and providers to attend in the office with all new equipment in place. Ensured the clinical staff knew what the front office responsibilities were and the front office employees know what the clinical staff responsibilities were, as well.

- The following day was "Go Live". A Sevocity trainer was onsite at the practice for 2 days providing real-time support while working with providers and staff.

Results:

Golden Triangle went live with Sevocity as planned on August 15, 2009. According to Khan, the initial Go Live day went about as expected. A reduced patient volume had been scheduled. This allowed extra time for providers and staffs to get questions answered and resolve any issues. Khan and other clinic staff were on stand-by to answer questions and Sevocity Customer Support was ready as well. The few questions that arose were quickly answered and the practice was able to end the initial day on schedule. "In addition, we provided lunch and had the whole staff sit down with the Sevocity representative to discuss the morning and how we could work things out" stated Khan.

Patient Volume:

In the days that followed Go Live, Golden Triangle was able to increase the patient volume as scheduled. The practice had planned on a period of six (6) weeks to ramp back up to their pre-EHR patient volume. However, according to Khan <u>the practice was pleasantly surprised to find that they were able to return to their pre-EHR patient volume in only two and a half weeks. Ms. Khan said, "the newly established Saturday hours are easier on the provider and staff. We actually see approximately 5 more patients per day per provider due to Sevocity her."</u> According to Khan, the increased efficiencies have largely come from scheduling: "With Sevocity, we are able to easily see the history when scheduling patients. With this information we have a much greater understanding of how long a patient visit will take and we are able to schedule additional appointments at the best available times relative to the existing patient appointments. Our providers have no problem working in a patient, since the visit is generally easier to manage in Sevocity. Also when it is necessary for a provider to be out of the clinic, some providers have opted to take their tablet home and handle all lab results and field some pharmacy issues."

Coding:

While expected, coding has improved even more than planned. According to Khan, "now that we have complete information in our charts, our weekly provider meetings include time to review our charting practices and educate our providers and staff on ways to ensure we are properly documenting to receive proper credit for the level of care we are providing. We have created templates within Sevocity for specific procedures, which helps with coding. So coding issues have not been the problems that they were in the past. We work together to code our services correctly the first time, which has decreased appeals and claim corrections. Sevocity has also increased our level of communication throughout the office due to the messaging system within Sevocity and we use it for everything."

Average Monthly Billing prior and subsequent to Sevocity implementation:

Code	Pre EHR	With Sevocity	Improvement (% Change)
99203/99213	$124,575	$18,068	
99204/99214	$43,418	$184,632	325%
99205/99215	$ 2,181	$10,493	381%
Total Monthly Billing	$170,274	$212,893	25% increase in charges

Staffing:

Since implementation of Sevocity, Golden Triangle has increased patient volume without adding staff. One fulltime equivalent (FTE) staff member was moved from front office to scanning. Another FTE was eliminated in the front office and they have slated to reduce two additional clinical FTEs within the next 90 days. They are also analyzing the possibility of combining the duties of two FTEs into one position, thereby further reducing staff once the chart room is officially closed and all patients are being seen in the EHR. At eight months from implementation and Go Live, they have scanned over 1000 patient charts and entered 874 new patients to the practice.

Other Outcomes:

Sevocity has helped Golden Triangle to identify and dismiss patients abusing pain management drugs. Since implementation of Sevocity, Golden Triangle stores a Pain Management Medication Contract signed by the patient in Sevocity. EPrescribing, including the PBMx information (Pharmacy Benefits Manager History, which includes medications prescribed by other physicians that have been reported to the pharmacy clearinghouse Surescripts), is used to detect patients already on pain medication prescribed by other providers.

The reporting features of Sevocity have allowed the practice to determine what staffing was needed where and to help identify which employees were most productive. When making decisions regarding eliminating FTEs, you certainly want to make sure you eliminate the least productive staff in most cases. With the use of the HL7 interface, Golden Triangle gets tests results in a more timely manner, which improves staff efficiency.

Practice's Recommendations:

Golden Triangle had a very successful EHR implementation. Some of the processes that Ms. Khan believes helped to ensure a successful transition to EHR include:

- Having clear goals and expected outcomes for the EHR.

- Creating selection criteria with rankings that are tied directly to those goals.

- Ensuring your providers are "on board."

- Developing an implementation plan with key milestones and dates and designating a strong individual within the practice to manage the implementation.

- Work on fine tuning coding problems; when the claim was coded inaccurately on paper it was usually due to not being able to find the correct code; however, with Sevocity we can create templates that utilize correct coding initiative and permit the provider to cover all key points when coding.

When asked if there was anything else that she would recommend to other practices looking to implement an EHR, Ms. Khan added that she would recommend having the EHR vendor come on-site for a few days to study the workflow prior to system customization and implementation. While it might add to the cost, Khan felt this would be a worthwhile investment and ease the transition to the EHR.

Summary:

The experiences of Golden Triangle highlight the experience of many of Sevocity's customers. The practice selected Sevocity for ease of use and affordability and fully expected their implementation of Sevocity to achieve a positive Return on Investment and result in an improved bottom line for the practice.

When asked about our current tough economic times and potential Medicare cuts, Golden Triangle's Practice Manager, Debbie Khan, remarked, "this is exactly when you should be implementing a strong EHR like Sevocity. Medical practices must look into ways to reduce costs and improve your bottom line by implementing EHR and working smarter, not harder."

Many thanks to Debbie Khan, Golden Triangle's Practice Manager, for taking the time to share her experiences and data for this Case Study. Sevocity would also like to add that Ms. Khan is indicative of another reason for Golden Triangle's EHR success: she readily accepted the role of EHR Project Manager for the practice, working in conjunction with the Sevocity Implementation Coordinator and team. We at Sevocity have learned many lessons from the hundreds of EHR

implementations we have managed and the most important factor we have learned for a successful EHR implementation is having a dedicated EHR contact within the practice. Ms. Khan did an excellent job in that role and in serving her practice.